

In The United States District Court
For The Middle District of Pennsylvania

James H. Williams
(Plaintiff)

Civil No[#] 1:CV-01-0280

vs

Richard L. Spaide
(Defendant)

Judge Kane

FILED
HARRISBURG, PA

DEC 23 2004

MARY E. D'ANDREA, CLERK
Per KL

Appendix Exhibits "A thru J"
For Materials
Plaintiff's statement of ~~facts~~ facts, summary Judgment
"Multiple Documents Exhibits"

- "A" Exhibits, Rejected Grievance dated Sept 26.98 --- 2 pages
- "B" Exhibits, Defendant Spaide. Extraordinary Report Feb 8.99 -- 2 pg's
- "C" Exhibits, Grievance "Mat-0067-99" March 8.99. legal material. 3 pg's
- "D" ---, threatening Request-slip Dec 4.98 against Defendant Spaide
and threatening M.C. # A-129751. Dec 7.98 against Defendant. 7 pg's
- E. - Pa. state Police investigation report Dec 20.99 - - - 3 pg's
- F - Commissary M.C. # 869952 dated Nov 20.98 - - - 2 pg's
- G - Rejected Grievance March 5.99, Appeal of Grievance and
Central office response dated April 14.99 - - - 4 pg's
- H - Criminal Violation DC-ADM-004 - - - 4 pg's
- I - Inmate Abuse Allegation Monitoring DC-ADM 001. 5 pg's
- J - I.A. office, state Police and OPR Response to
Plaintiff's Complaint filed against Defendant Spaide - - - 8 pg's

Exhibit

A

Rejected Grievance

OFFICIAL INMATE GRIEVANCE

(Exhibit A)

GRIEVANCE NO.

TO: GRIEVANCE COORDINATOR <i>Wesley C. Butler</i>	INSTITUTION <i>SCJ Pharmacy</i>	DATE <i>7-26-98</i>
FROM: (Commitment Name & Number) <i>James G. Williams NY-8692</i>	INMATE'S SIGNATURE <i>James G. Williams</i>	
WORK ASSIGNMENT	QUARTERS ASSIGNMENT <i>7-B-2001</i>	

INSTRUCTIONS:

1. Refer to the inmate handbook Page 12 and DC-ADM 804 for information on the inmate grievance system.
2. State your grievance in Block A in a brief and understandable manner.
3. Next, you are required to list in Block B the specific actions you have taken to resolve this matter. Be sure to include the identity of staff members you have contacted.

A. Brief, clear statement of grievance:

I was asked to J.B. Hall call April 7-23-72 from A.B. Block. Joe claims found an
envelope posted. Joe generally filed an insurance against A. Block and manages
insurance on missing. Project - sign the not listed by changing any one
place to indicate. Letter address me to J.B. creating a "medical" between
not insurance and myself. which is established. I brought the matter to an
quick effect - is there any part further he stated he'll give me an envelope
looking for the first the time to wear another inside. Finding Brown
his cable line in the wall doesn't work? and the Hall will say that
and the Southern police. There's 4 cases double's call on the letter that
place. by the time you receive this, J.B. have been in a matter
call to be provided for 7 days or more. you will come to say
nothing to the State council about me. Started out to answer

B. Actions taken and staff you have contacted before submitting this grievance:

spoke with Miss Green, Saturday, he offered me the seat whenever
 other seats, I spoke with Miss Greenhouse to see what I
 spoke with Lt. Henderson I think Lt. he stated the only reason
 he enters is to the police as though that was a threat.

Your grievance has been received and will be processed in accordance with DC-ADM 804.

Signature of Grievance Coordinator

Date _____

COMMONWEALTH OF PENNSYLVANIA
State Correctional Institution at Mahanoy

Date: 1/28/98

SUBJECT: CONSOLIDATED INMATE
GRIEVANCE REVIEW SYSTEM

TO: James Williams

FROM: Carol Dotter
Carol M. Dotter
Corrections Superintendent Assistant
(Inmate Grievance Coordinator)

I am returning your grievance because you have not complied with the following provision(s) of the DC-ADM 804, effective October 20, 1994, Consolidated Inmate Grievance Review System.

As per Section VI, Procedures A.1., all grievances shall be in writing and in the format provided on the forms supplied by the institution. (DC-804 Part 1.). Forms are available in each Housing Unit upon request from Unit Staff.

As per Section V.B., Informal Resolution of Problems, all inmates are expected to attempt to resolve problems or differences with staff on an informal basis through direct contact or by sending a Request Slip to appropriate staff. It is required that a genuine effort be made to resolve the problem before the grievance system is used.

Block B must be completed, as per the instructions (#3) of the Official Inmate Grievance Form (DC-ADM 804, Part 1).

All grievances shall be presented individually. (Section VI. A.2.).

Only an inmate who has been personally affected by a Department or institution action or policy shall be permitted to seek review of a grievance (Section VI. A.3.).

(Continued - Reverse Side)

*Give Mr. Spide
a reasonable
amount of
time to address
your concerns
(5 days) before
filing an
official
grievance.
If this
problem is not
resolved by
Wednesday or
Thursday,
submit the
grievance
again.
Write in Part B of the
grievance what day you reported the
problem to your Unit
Manager.*

Grievances must be signed (Section VI A.3.)

All grievances must be presented in good faith. They shall include a brief statement of the facts relevant to the claim. The text of the grievance must be legible and presented in a courteous manner.

Grievances based upon different events should be presented separately, unless necessary to combine to support the claim.

Section VI E., Exceptions, states that any inmate grievance may be addressed to the Inmate Grievance Coordinator except issues related to the following:

1. DC ADM 805 - Policy & Procedures for Obtaining Pre-Release Transfer.
2. DC ADM 801 - Inmate Disciplinary and Restricted Housing Unit Procedures. SEE DC-ADM 801 VI., G & I.
3. DC ADM 802 - Administrative Custody Procedures

See DC-ADM 802, VI, B, 1,2. Appeal from Initial Review, see DC-ADM 802, VI, B, 4, a.

4. DC-ADM 814 - Incoming Publications

See 814-IIIB, Appeal from Initial Review, see 814-IIID.

Additionally, there may be other kinds of issues for which Initial Review Procedures have been previously established by Administrative Memorandum or Policy Statement.

Grievances related to the above issues shall be according to procedures specified in the directives listed and shall not be reviewed by the Inmate Grievance Coordinator.

Initial Reviews must be submitted within 15 calendar days after the events upon which claims are based (Section VI B.2.).

Exhibit

B

O.O.C. Employee Extraordinary Report
by Defendant Spaide Feb. 8.99

DEPARTMENT OF CORRECTIONS
EMPLOYEE REPORT OF EXTRAORDINARY OCCURRENCE
(TYPE OR PRINT LEGIBLY)

11-20-95

NAME: Capt Shirley TITLE: Shift Cmdr DATE: 2-8-99 TIME: 1155
 NAME: Richard Spindle TITLE: Unit Manager LOCATION OF OCCURRENCE: I Bk Vestibule
 SIGNATURE: [Signature] TYPE OF OCCURRENCE: Assault by Inmate

Inmates Involved Name and DC number	Staff Involved Name and Title	Witnesses

Complete Detailed Description of Incident (if force is used, include an account of events leading to a use of force, reasons for employing force):

As I was entering I B Pod I was backing into the pod while talking to Inmate Crockett. As I was turning around something struck me on the left side of my head. I fell to my knee and was struck on the right side of my head. Initially I thought the door had closed on my head, however after the 2nd punch I realized that an inmate was punching me. After the 2nd punch I grabbed the inmate around the waist and forced him against the ~~back~~ wall located in the front of the vestibule. At that time Officer Williams and Steinke subdued the inmate by grabbing his arms. Officer Williams then handcuffed the inmate. He was then taken to the dispensary. The officer used minimum force to handcuff the inmate. After the 2nd punch. Actions Taken (in chronological order with times listed): I recognized the inmate as A48692 Williams. Inmate Williams was handcuffed & taken to the dispensary. I was taken to the dispensary and rec'd initial medical treatment. I was then taken to the Pottsville Hospital where my lacerations were treated and my Rt. eye was flushed.

No weapons were used.

Description of Injuries to Staff or Inmates and Medical Attention Required, if any:

Lacerations of both ears

Lacerations on the Right eye.

Bruise on Left knee

Bruises around both eyes

Description of Method in Which Force Was Applied by Staff and Any Security Equipment Used (Baton, E.B.I.D., Cap-Stun, etc.):

I used my arms to wrap the inmate up until the officers (Williams / Steinhilber) were able to subdue inmate Williams.

Exhibit

C

GRIEVANCE # Mah-0067-99 Z
Related documents
Legal Material shipped 3-8-99

DC-804

PART II

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PA 17001

OFFICIAL INMATE GRIEVANCE
INITIAL REVIEW RESPONSE

GRIEVANCE NO.

MAH-0067-99

TO: (Name & DC NO.)	INSTITUTION	QUARTERS	GRIEVANCE DATE
James Williams AY-8692	SCI-Mahanoy	F/D 18	2/24/99

The following is a summary of my findings regarding your grievance:

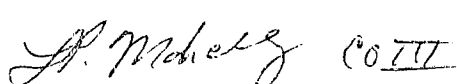
This response is in regard to your grievance concerning your property.

Our records indicate that the photographs were mailed to you on February 18, 1999 and the box of legal material was shipped to you on February 23, 1999. I also managed to locate the radio and I will be shipping it to you as soon as the Business Office verifies that you have the money in your account to pay for the shipping costs. Since the radio was not in your possession at the time of your confinement to the RHU, the institution will not be responsible for the shipping cost.

This grievance is resolved.

LPM:js

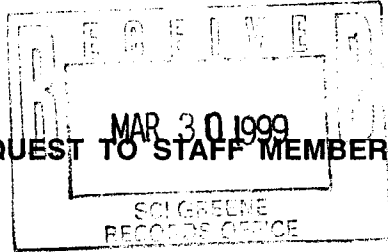
cc: Deputy Novotney
Deputy Klem
Mrs. Dotter
DC-15
file

Refer to DC-ADM 804, Section VIII, for instructions on grievance system appeal procedures.	SIGNATURE OF GRIEVANCE COORDINATOR 	DATE 3/4/99
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DC-135A INMATE'S REQUEST TO STAFF MEMBER	COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF CORRECTIONS INSTRUCTIONS Complete Items Number 1-7. If you follow instructions in preparing your request, it can be disposed of more promptly and intelligently.
1. TO: (NAME AND TITLE OF OFFICER) TO: Mrs. C. Potter (Grievance Coordinator) Mahanay	2. DATE March 3, 99
3. BY: (INSTITUTIONAL NAME AND NUMBER) To: James Williams AY-8692	4. COUNSELOR'S NAME
5. WORK ASSIGNMENT	6. QUARTERS ASSIGNMENT S.C.E. Greene County (F-D18)
7. SUBJECT: STATE COMPLETELY BUT BRIEFLY THE PROBLEM ON WHICH YOU DESIRE ASSISTANCE. GIVE DETAILS.	
<p>Subject: Grievance # MAH-0067-99 dated Feb 20, 99 - Feb 24, 99 AS PROMISE Attached is A copy of my bill of SALE Receipt for my Radio (Radio shack priced at \$46.09 in A Property Personal CARD Receipts from S.C.E. P.H. And A P.O.C. outside purchase Approval Form, from P.H. AS WELL. 2. A copy of my request slip dated JAN 27, 99 Addressed to the H-H-CI. Lt. requesting more legal documents from the long term storage Area. which I never received Also ATTACHED.</p>	
<p>P.S. I could almost swear I remembering seeing my Radio or A Radio that looks like mine in one of the H-H-CI office's. again they said the inmate who had my Radio is currently House inside the H-H-CI on P.O.D. H-D Cell's Basic? from 7-B block it was taken from him during search cell</p>	
8. DISPOSITION: (DO NOT WRITE IN THIS SPACE) <p>Mr. Williams, Both your radio & your legal materials were mailed to you today. S.C.I. Mahanay will pay the shipping fees for the legal material but not for the radio because it was not in your possession at the time. Again, they were both mailed to you today. Thank you for your patience.</p> <p><input type="checkbox"/> TO DC-14 CAR ONLY <input type="checkbox"/> TO DC-14 CAR AND DC-15 IRS</p>	
STAFF MEMBER C. Potter	DATE 3/8/99

DC-135A

INMATE'S REQUEST TO STAFF MEMBER

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS

INSTRUCTIONS

Complete Items Number 1-7. If you follow instructions in preparing your request, it can be disposed of more promptly and intelligently.

1. TO: (NAME AND TITLE OF OFFICER)

Mr. Randy Flood (Records Supervisor office)

2. DATE

March 29, 99

3. BY: (INSTITUTIONAL NAME AND NUMBER)

JAMES WILLIAMS AY-8692

4. COUNSELOR'S NAME

5. WORK ASSIGNMENT

6. QUARTERS ASSIGNMENT

F-D 18

7. SUBJECT: STATE COMPLETELY BUT BRIEFLY THE PROBLEM ON WHICH YOU DESIRE ASSISTANCE. GIVE DETAILS.

If possible, could you please send me a copy of my Transfer Petition from S.C.I. Mahanoy to S.C.I. Greene. Mahanoy to S.C.I. Coal-Township. I need copies of my Transfer Petition three (3) copies each please. I also need three (3) copies of my "Request Slip" dated Dec 4, 98 threatening Mr. Spade. ~~Also~~ I need two (2) copies each for all my DC-15 files from Monday Feb 8, 99 until Monday March 29, 99. At 10¢ per page, that's Request Slip, Grievance's, Medical and Misconduct Reports etc. soon as possible please. All documents from DC-15 files from 2-8-99 to 3-29-99 Green as me being transferred from S.C.I. Graterford?? Attached is a signed Cash-Slip for the above service. Thank you very much. I'll await your Reply. James Williams

8. DISPOSITION: (DO NOT WRITE IN THIS SPACE)

Enclosed A total of 53 copies.
1st copy is \$1.00, each additional copies
are 10¢ each. Total on Cash Slip Forwarded
To Inmate Accounts is \$6.20.

Copies of Transfer Petitions are not
Available To Inmates.

☐ TO DC-14 CAR ONLY☐ TO DC-14 CAR AND DC-15 IRS

STAFF MEMBER

Mrs. Haystackham RS II

DATE

3-30-99

Exhibit

D

Threatening Request Slip dated Dec 4.98
M.C. # A-125751 Threatening Defendant
Spaide Dec 7.98

DATE _____

FORM DC-141 Rev. 6-84		PART I		COMMONWEALTH OF PENNSYLVANIA		A 125751	
<input checked="" type="checkbox"/> MISCONDUCT REPORT <input type="checkbox"/> OTHER		DEPARTMENT OF CORRECTIONS					
DC Number AY8692	Name Williams, James	Institution SCI-Mah	Incident Time 24 Hr. Base 0800	Incident Date 12-7-98	Date of Report 12-7-98		
Quarters H-D-002	Place of Incident H-D-002						
OTHER INMATES OR STAFF INVOLVED OR WITNESSES (CHECK I OR W)							
DC Number	Name	I	W	DC Number	Name	I	W
MISCONDUCT CHARGE OR OTHER ACTION <u>Class 1 / Cat B, #3 - Threatening another person.</u>							
STAFF MEMBER'S VERSION <u>On 12-7-98 I rec'd a request slip addressed to me from AY8692 Williams. The content of this request slip contained statements which could be construed as hostile and threatening toward me. The content included statements such as - "I dare you to place me back in 1007 cell on I/B, bad ass. I'll be out Monday or Tuesday night. I'll see you first thing in the morning so we can "discuss" this move. I don't care who be with you. Now you can deal personally with my Attitude problem. Just like I dealt with the deputy at Rockview I'll deal with your ass the same way. I'm not one of your little nigger boy." Although Williams would not acknowledge being the author of the request slip, a handwriting sample from his records was compared with the request slip, which confirmed Williams as the author.</u>							
IMMEDIATE ACTION TAKEN AND REASON <u>Note: Copy of the request slip is attached. Remains present status pending actions by the Hearing Examiner</u>							
PRE-HEARING CONFINEMENT				FORMS GIVEN TO INMATE			
IF YES				REQUEST FOR WITNESSES AND REPRESENTATION <input checked="" type="checkbox"/> INMATE'S VERSION <input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/> YES 12/7/98	TIME N/A	DATE N/A		REPORTING STAFF MEMBER SIGNATURE AND TITLE <u>Richard L. Spade</u> <u>Richard L. Spade, W.M.</u>			
ACTION REVIEWED AND APPROVED BY RANKING C.O. ON DUTY <u>Capt Shipley</u>				DATE AND TIME INMATE GIVEN COPY DATE 12-7-98 TIME 24 HOUR BASE 2005			
YOUR HEARING MAY BE SCHEDULED ANY TIME AFTER DATE 12-7-98 TIME 0800				Misconduct Category <input checked="" type="checkbox"/> CLASS 1 <input type="checkbox"/> CLASS 2		Signature of Person Serving Notice <u>Cot Arnold</u>	
NOTICE TO INMATE							
You are scheduled for a hearing on this allegation on the date and the time indicated or as soon thereafter as possible. You may remain silent, if you wish. Anything you say will be used against you both at the misconduct hearing and in a court of law if this matter is referred for criminal prosecution. If you choose to remain silent, the hearing committee/examiner may use your silence as evidence against you. If you indicate that you wish to remain silent, you will be asked no further questions. If you are found guilty of a Class 1 misconduct, any pre-release status you have will be revoked.							

DC-141 Rev. 6-84		PART II A			COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF CORRECTIONS	
INMATE REQUEST FOR REPRESENTATION AND WITNESSES						
DC Number	Name	Institution	Date	Number as on Part I		
AY8692	Williams, James	SCI-Mah.	12-7-98	A125751		

You have been charged with a misconduct. You may request assistance and/or witnesses to appear at your hearing by completing the section(s) below.

In order to have assistance or witnesses at your hearing, you must complete this form and present all copies to one of your housing officers no later than 9:00 a.m. the first working day after you receive notice of the misconduct.

Assistance: ☐ I do not request assistance
☐ I request assistance by _____
(The person requested must be willing to assist you)

Witnesses: You may request witnesses in accord with DC-ADM 801. State the relevance and importance of the testimony the witness will give.

<p>1. Name of Witness: <u>CL Klatka</u> If Inmate <u>No.</u> Quarters <u>G to 2 shift</u></p> <p>Why is this person's testimony relevant and important? <u>who seen Spaide at my door today around</u> <u>he'll testify to Spaide being on</u> <u>this pod at my door. Yet, he refused</u> <u>to sign H-D pod book as though he was</u> <u>never here when he was.</u></p>	<p>DO NOT WRITE IN THIS SECTION For Use by Hearing Examiner</p> <p>Witness permitted? <input checked="" type="checkbox"/> If not, why not? <u>Witness</u></p>
---	--

<p>2. Name of Witness: <u>SHARP</u> If Inmate <u>No.</u> Quarters <u>DE-2942 H-D 24</u></p> <p>Why is this person's testimony relevant and important? <u>while he was standing in the shower waiting</u> <u>to come out he heard along with the rest</u> <u>of the pod Spaide threaten me at my door</u> <u>and while he was leaving (don't be writing this shit to me)</u> <u>in my rooming your ass back) no matter what you do.</u></p>	<p>Witness permitted? <input checked="" type="checkbox"/> If not, why not? <u>Nah Relevant to</u> <u>Written Threats</u></p>
---	--

<p>3. Name of Witness: _____ If Inmate _____ Quarters _____</p> <p>Why is this person's testimony relevant and important? <u>He played me out before the request-slip now I played</u> <u>him out after the request-slip. half the block heard him it's</u> <u>self defense for me.</u></p>	<p>Witness permitted? _____ If not, why not?</p>
--	--

James Williams
Inmate's Signature

This section to be completed by Housing Officer only
Received completed form 0655 hours 12-8-98
Time Date

Col J. Klatka

Housing Officer's Signature

R. Bear
Hearing Examiner's Signature

20
2/10/99

(G-2)

You can give the D.A. A copy of this who cares

DC-141

PART II C

COMMONWEALTH OF PENNSYLVANIA

Rev. 6-84

HEARING SUPPLEMENT

INMATE VERSION AND WITNESS STATEMENTS

DEPARTMENT OF CORRECTIONS

DC Number

Name

Institution

No. from PART I

AY-8692

James Williams

SCZ Mth

A175751

INMATE'S VERSION

No plea! Yes, the Request-slip was construed to be Hostile & threatening toward Mr. Spade Z-Block Unit Manager! I told him before about playing games with me. I tried being somewhat nice to an avail. I'm here to serve me 25 to 30 years not to be harassed by certain staff who doesn't approve of my past behavior at other jails. I done what I've done. I'm not here to kiss his ASS, in order for him to do his Job. unfortunately me witness Mr. Sharp DE 2942 also heard part of Mr. Spade threats toward me. Mr. Spade declines to sign the Work H.O. H-H-CO Rod Log which is required to all visitor upon entering this area. I am going to see it to Kintha Jean's Mr. Spade approaching me back with an Hostile attitude toward me, which half the Block heard. Yet, he doesn't mention any of this in his report? All this B.S. about even change he's got, he's going to make it hard on me, especially after I wrote Dep't elsewhere. he fuck-up this time, because half the H-H-CO heard his little threats. I'm not doing no writing to no parties or the Dept about him. I personally wanted to handle this one myself. what he should done was read me Jacket. And see exactly what I was in the H-H-CO for. I have no medical taking care of myself. I never denied writing that Request-slip. I never done no actions. Now I want to see what he's made of. I got 8 years total in these H-H-CO doing 2 more years makes no difference to me. I guess love personal matters fuck him and the Horse he rode on. I don't do any running from no-staff. what he should of done was write me up under the P.A. Code class 1 cat A threatening staff not another person. one thing I like about staff here they don't believe shit until it hits them. I don't allow staff to play and harass me. nor do I play and harass staff. I got not in 1999 by the year 2000 I will be released back to population all I got is time. After I received this Street Time (new-case) I'll be headed to ~~that~~ return back to Camp Hill S.M.C. anyway. I'll be me there time back. Spade you can't deal with me. I won't allow it any more.

FORM DC-141 PART II B

COMMONWEALTH OF PENNSYLVANIA

Rev. 6-84

DISCIPLINARY HEARING REPORT

DEPARTMENT OF CORRECTIONS

DC Number	Name	Institution	Hearing Date	Hearing Time	No. from PART I
A48692	Williams	SLIMAH	12/10/98	1215	A125751
INMATE	<input type="checkbox"/> Guilty	<input checked="" type="checkbox"/> No Plea	Verdict		<input type="checkbox"/> Guilty
PLEA	<input type="checkbox"/> Not Guilty	<input type="checkbox"/> Other			<input type="checkbox"/> Not Guilty

HEARING ACTION

CHARGES B#3

FINDINGS OF FACT, VERDICT, AND SANCTIONS IMPOSED

My Beliefs Staff Report and Inmate Written Version will support the fact he acknowledged being the author of DC135A Part 2/4/98. My Beliefs the following statements are in fact threats to another person - "One written warning is all you get and this is it" "I want you to place me back in 1007 cell I'll be out Monday or Tuesday Night I'll see you first thing in the morning so we can discuss the move." "I'll deal w/ you like the Deputy Rockview"

Sanction:
60 days & c
12/8/98

<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	The inmate has heard the decision and has been told the reason for it and what will happen.
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	The circumstances of the charge have been read and fully explained to the inmate.
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	The opportunity to have the inmate's version reported as part of the record was given.
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	The inmate has been advised that within 15 days a request for a formal review may be submitted and that this request must contain specific reasons for the review.

DC135A - 12/4/98
Witness Form
SEE APPENDICES
Version Form

NAME(S) OF HEARING EXAMINER/COMMITTEE
(TYPED OR PRINTED)

K. Bleon

Hearing Report and all appended information must be signed. Signature indicates finished report with appendices.

SIGNATURE OF HEARING EXAMINER/COORDINATOR

(G-34)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS

DC-141 Part III

Program Review Committee

☐ Misconduct Appeal☒ Periodic Review☐ Other

DC Number	Name	Institution	Date of Review	No. of Review
AY8692	Williams, James	SCI-Mahanoy	12/23/98	1

INITIAL REASON FOR CONFINEMENT

Class I Category B#3, Threatening Another Person misconduct, received on 12/7/98. As reported, Unit Manager Spaide received a threatening request slip from Williams. Williams received a sanction of 60 days DC, effective 12/8/98.

PROGRAM REVIEW COMMITTEE'S DECISION AND ITS RATIONALE

RHU staff report unsatisfactory conduct from Williams, who is frequently disrespectful. They also report that he continues to make threatening remarks toward Mr. Spaide. PRC notes that Williams refused to attend his PRC review today. He gave no reason for his refusal.

PRC's decision is to continue DC status and review Williams again in 30 days.

SUPERINTENDENT'S REVIEW/APPROVAL

Martin L. Dragovich
Superintendent

DECISION RELATIVE TO HEARING EXAMINER'S VERDICT

☒ Not Applicable ☐ Sustain ☐ Amend ☐ Refer Back for Further Study
☐ Exonerate

Names of Program Review Committee	Signatures	Date
James E. Unell, IPM	<u>James E. Unell</u>	12-24-98
James J. McGrady, Major	<u>James J. McGrady</u>	12-28-98
Ken Chmielewski, School Principal	<u>Ken Chmielewski</u>	12/28/98

(6-5)

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS

DC-141 Part III

Program Review Committee

☐ Misconduct Appeal☒ Periodic Review☐ Other

DC Number	Name	Institution	Date of Review	No. of Review
AY6892	Williams, James	SCI-Mahanoy	1/21/99	2

INITIAL REASON FOR CONFINEMENT

Class I Category B#3, Threatening Another Person misconduct, received on 12/7/98. As reported, unit Manager Spaide received a threatening request slip from Williams. Williams received a sanction of 60 days DC, effective 12/8/98.

PROGRAM REVIEW COMMITTEE'S DECISION AND ITS RATIONALE

James Williams has refused to appear for today's 30-day review. However, his reports are significantly improved over last month's, and he is described as respectful and making good use of his time while in the RHU. The DC time expires on 2/5/99, and there is no reason why he cannot return to his former housing unit.

Upon return to his former housing unit on 2/5/99, he is encouraged to avoid further misconducts, seek out a responsible job assignment, and involve himself in programs which have been recommended by the Unit Team.

SUPERINTENDENT'S REVIEW/APPROVAL

Martin L. Dragovich
Superintendent

DECISION RELATIVE TO HEARING COMMITTEE'S VERDICT

☒ Not Applicable ☐ Sustain ☐ Amend ☐ Refer Back for Further Study
☐ Exonerate

Names of Program Review Committee	Signatures	Date
Edward J. Klem, DSCS	<u>E. Klem</u>	1/22/99
James J. McGrady, Major	<u>James J. McGrady</u>	1-22-99
James Unell, IPM	<u>James Unell</u>	1-22-99

Exhibit

E

Pa. State Police Investigation Report
dated Dec 20, 99

PENNSYLVANIA STATE POLICE

1006

INVESTIGATIVE REPORT TRANSMITTAL SHEET

DATE SENT: DEC 20 1999

TO: District Attorney's Office
Schuylkill County Courthouse
401 North Second Street
Pottsville, PA 17901

RE: James WILLIAMSCHARGE: Assault by PrisonerINCIDENT NUMBER: L03-616775INVESTIGATOR: Tpr. J. SZCZECINATROOP/STATION: L / FRACKVILLE

ADDRESS: Pennsylvania State Police
297 Morea Road
Frackville, PA 17931-2311

TELEPHONE NUMBER: (570) 874-0207

REMARKS: RULE 325

SENDER: S. L. FATULA, CT3

YOU SHOULD RECEIVE 80 PAGES, INCLUDING THIS COVER SHEET, IF YOU DO NOT RECEIVE ALL THE PAGES, PLEASE CALL THE SENDER/INVESTIGATOR.

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If this material is received in error, please notify the Pennsylvania State Police at the telephone number listed above, and return it to the office address listed.

SP 7-0051.1 (10-96) PENNSYLVANIA STATE POLICE CONTINUATION SHEET <input checked="" type="checkbox"/> SUPPLEMENTAL INVESTIGATION REPORT <input type="checkbox"/>		REPORT TYPE <input checked="" type="checkbox"/> INCIDENT <input type="checkbox"/> OTHER		DATE(S)/DAY(S) OF INCIDENT 02/08/99 Mon TIME(S) OF INCIDENT 0805		INCIDENT NO. L3-0615775 JUVENILE <input type="checkbox"/> DOMESTIC VIOLENCE <input type="checkbox"/>	
ATTACHMENTS: <input type="checkbox"/> MISSING PERSON CHECKLIST <input type="checkbox"/> FELONY CRIMES AGAINST THE PERSON <input type="checkbox"/> STATEMENT FORM(S) <input type="checkbox"/> VICTIM/WITNESS ASSISTANCE GUIDE RECEIPT <input type="checkbox"/> RIGHTS WARNING AND WAIVER <input type="checkbox"/> PROPERTY RECORD <input type="checkbox"/> OTHER				DISP.: <input type="checkbox"/> CLEARED BY ARREST <input type="checkbox"/> UNFOUNDED <input type="checkbox"/> EXCEPTIONALLY CLEARED - DATE A <input type="checkbox"/> DEATH OF ACTOR D <input type="checkbox"/> VICTIM REFUSED TO COOPERATE B <input type="checkbox"/> PROSECUTION DECLINED E <input type="checkbox"/> JUVENILE/NO CUSTODY C <input type="checkbox"/> EXTRADITION DENIED N <input type="checkbox"/> NOT APPLICABLE <input type="checkbox"/> MULTIPLE CLEAR-UP			
1. ORIGIN STATION PAPDSP5200/Frackville						2. DATE OF REPORT 02/22/99	
3. OFFENSE Aggravated Assault						4. VICTIM Richard L. SPAIDE	
5. NARRATIVE <p>I arrived at S.C.I.M. on 02/08/99 at 0855 hrs and met with Capt Joseph MICHAELS, Security Office. Capt MICHAELS provided me with the victim and suspect information and provided a brief synopsis of the incident. Upon my arrival the victim was being transported to the Pottsville Hospital. The suspect was removed from I-B block and was being house in the Restricted House Unit.</p> <p>Capt MICHAELS provided the following background related to this investigation.</p> <p>✓ On or about 11/20/98 the suspect was placed in the RHU for 15 days for lying to an employee and Refusing to obey an order. This incident involved the suspect violating the procedures of the Commissary Program. This information is documented under Misconduct Report 869952, see attached.</p> <p>✓ On 12/04/98 while in the RHU the suspect wrote a letter to the victim, via an Inmate Request to Staff Member (DC-135A). In the letter the suspect implies he is being harassed by the victim and he threatens the victim. The suspect wrote: "One written warning is all you get and this is it. Now play yourself. Ask one of your ass kissers what the difference between an inmate and a convict... read my file carefully...since you started this I'll end it...I made my move now it's time for you to make yours...I dare you to place me back in 1007 cell on I-B...I'll be out Monday or Tuesday night. I'll see you first thing in the morning so we can discuss this move. P.S. juess (just) like I dealt with the Deputy at Rockview. I'll deal with your ass the same way..."</p> <p><u>As a result of this letter the suspect received a misconduct and received 50 more days in the RHU. Refer to Misconduct A 125751, attached.</u></p> <p>✓ The suspect was released from the RHU on 02/05/98 in the PM and his first contact with the victim was when this incident occurred.</p> <p><u>Capt MICHAEL indicated the suspect did have a history of assaults against staff members.</u></p> <p>The only physical evidence at the scene was a small drop of blood on a metal section of the wall which divides the cellblock and the lobby. See attached photograph.</p> <p>The victim's injuries were photographed by Capt MICHAELS and will be attached upon receipt.</p> <p style="text-align: center;">Continued</p>							
6. OFFICER'S NAME/SIGNATURE/BADGE NO. [Signature] 6372				7. INVS. RECM. <input checked="" type="checkbox"/> CONT. <input type="checkbox"/> TERM.		8. SUPV. INIT./BADGE NO. [Signature] 1109	
9. <input checked="" type="checkbox"/> CONCUR <input type="checkbox"/> NONCONCUR				10. PAGE 3			

STATION

SP 7-0051A (10-98) PENNSYLVANIA STATE POLICE CONTINUATION SHEET <input checked="" type="checkbox"/> SUPPLEMENTAL INVESTIGATION REPORT <input type="checkbox"/>		PORT TYPE <input checked="" type="checkbox"/> INCIDENT <input type="checkbox"/> OTHER	DATE(S)/DAY(S) OF INCIDENT 02/08/99 Mon TIME(S) OF INCIDENT 0805	INCIDENT NO. L3-0615775 JUVENILE <input type="checkbox"/> DOMESTIC VIOLENCE <input type="checkbox"/>	
ATTACHMENTS: <input type="checkbox"/> FELONY CRIMES AGAINST THE PERSON <input type="checkbox"/> STATEMENT FORM(S) <input type="checkbox"/> VICTIM/WITNESS ASSISTANCE GUIDE RECEIPT <input type="checkbox"/> RIGHTS WARNING AND WAIVER <input type="checkbox"/> PROPERTY RECORD <input type="checkbox"/> OTHER		MISSING PERSON CHECKLIST <input type="checkbox"/> DISP.: <input type="checkbox"/> CLEARED BY ARREST <input type="checkbox"/> UNFOUNDED <input type="checkbox"/> EXCEPTIONALLY CLEARED - DATE A <input type="checkbox"/> DEATH OF ACTOR D <input type="checkbox"/> VICTIM REFUSED TO COOPERATE B <input type="checkbox"/> PROSECUTION DECLINED E <input type="checkbox"/> JUVENILE/NO CUSTODY C <input type="checkbox"/> EXTRADITION DENIED N <input type="checkbox"/> NOT APPLICABLE <input type="checkbox"/> MULTIPLE CLEAR-UP			
1. ORIGIN STATION PAPSP5200/Frackville			2. DATE OF REPORT 02/22/99		
3. OFFENSE Aggravated Assault			4. VICTIM Richard L SPAIDE		
5. NARRATIVE					
<p>INTERVIEW WITH VICTIM SPAIDE:</p> <p>* SPAIDE stated: "I was coming to the block from outside. I saw CROCKET and I asked him how he liked his job. <u>I went to B Pod and went to the door. I was still talking to CROCKET and I was kind of backing into the Pod.</u> The first hit was on the left side of my face. I thought it was the door that hit me. I realized I was holding the door and the second one hit me on the right side of my face. The first punch knocked me to my knees. After the second punch I realized what was going on. I saw the brown pants and I knew it was an inmate. After the second punch I grabbed him around the waist and I pulled him towards my body. I could feel him punching and hitting me. It was probably a total of four more times that he hit me. <u>I was covered up and I don't think he could get a good shot.</u> The CO came over and broke it up and cuffed the inmate. It was all over pretty quick, probably only fifteen seconds. I went to medical with an officer and they recommended I go to the hospital because my contact lens shattered in my eye."</p> <p><u>I told SPAIDE the suspect was alleging that SPAIDE was harassing him. SPAIDE stated: "He was having a problem with his celly and he wanted a cell change. I wouldn't let him change because I have certain rules I go by and he wasn't eligible at this time. He also wanted to go up stairs and I usually don't put level four inmates up stairs. He went to the RHU because of a problem with his Commissary. I was told he wasn't going to the RHU by he wanted to go to the RHU. Usually if someone goes to the RHU they don't come back to the same cell, so I think that is what he thought would happen. I got the threatening request slip from him and I went and talked to him about it. He told me he wrote it and he said it was a threat. I wrote him up and he got another 60 days. I knew he was getting out of the RHU on Friday night and I had him put back in the same cell. I figured we would deal with it when he was back on the unit."</u></p> <p><u>SPAIDE indicated he wasn't specifically targeting the suspect and he was only following his aforementioned procedures.</u></p> <p>Following the interview I spoke with Capt MICHAELS. He indicated the suspect would immediately be transferred to the State Correctional Institution at Coal Township. He indicated the suspect would be transported back to S.C.I.M. for the purpose of Preliminary Arraignment and Preliminary Hearing as long a sufficient notice is provided.</p> <p>C.L.E.A.N. message MYC541-74220 was transmitted to the Commissioner and Deputy Commissioner of Operations as per A.R. 9-6, 6.11, see attached copy.</p> <p style="text-align: center;">Continued.</p>					
6. OFFICER'S NAME/SIGNATURE/BADGE NO. SzcZECINA 6678		7. INVS. RECM. <input checked="" type="checkbox"/> CONT. <input type="checkbox"/> TERM.	8. SURV. INIT./BADGE NO. [Signature]	9. <input checked="" type="checkbox"/> CONCUR <input type="checkbox"/> NONCONCUR	10. PAGE 87

STATION

7

Exhibit

F

M.C. # 869952 Commissary incident
dated Nov 20, 98

PART I

869952

☒ MISCONDUCT REPORT ☐ OTHER DEPARTMENT OF CORRECTIONS

DC Number	Name	Institution	Incident Time 24 Hr. Base	Incident Date	Date of Report
AY3/93	WILLIAMS JAMES	SCIAAH	1050	11/20/93	11/20/93

Quarters	Place of Incident
E 13 7	COMMISSARY

OTHER INMATES OR STAFF INVOLVED OR WITNESSES (CHECK I OR W)

DC Number	Name	I	W	DC Number	Name	I	W

MISCONDUCT CHARGE OR OTHER ACTION CLASS 1 CATEGORY B = 26 LYING TO AN EMPLOYEE
CLASS 1 CATEGORY B = 7 REFUSING TO OBEY AN ORDER

STAFF MEMBER'S VERSION INMATE WILLIAMS AY8692 ATTEMPTED TO
RECEIVE COMMISSARY BY PUTTING HIS OWN MONEY AMOUNT
ON THE TOP RIGHT OF HIS COMMISSARY ORDER SHEET. HE KNOWS
THIS IS NOT ALLOWED. THE COMMISSARY OFFICER IS TO PUT THE
MONEY AMOUNT ON THE COMMISSARY ORDER SHEET. THIS IS THE
SECOND MISCONDUCT WRITTEN ON INMATE WILLIAMS FOR DOING
THE EXACT SAME THING. INMATE WILLIAMS WAS ORDERED NOT
TO PUT HIS OWN MONEY AMOUNT ON HIS COMMISSARY SHEET

IMMEDIATE ACTION TAKEN AND REASON

Remain present status
pending action by
the Hearing Examiner

PRE-HEARING CONFINEMENT

		IF YES		<input checked="" type="checkbox"/> NO <i>YES</i>	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TIME <i>N/A</i>	DATE <i>N/A</i>	FORMS GIVEN TO INMATE <input checked="" type="checkbox"/> REQUEST FOR WITNESSES AND REPRESENTATION <input checked="" type="checkbox"/> INMATE'S VERSION	
REPORTING STAFF MEMBER SIGNATURE AND TITLE <i>David J. Bodman</i> COMMISSARY MANAGER II			ACTION REVIEWED AND APPROVED BY RANKING C.O. ON DUTY <i>Capt. S. Shipley</i>		DATE AND TIME INMATE GIVEN COPY DATE <i>11-20-98</i> TIME 24 HOUR BASE <i>1410</i>
YOUR HEARING MAY BE SCHEDULED ANY TIME AFTER DATE <i>11-22-98</i>			TIME <i>0800</i>		Signature of Person Serving Notice <i>Ing B</i>
			Misconduct Category <input checked="" type="checkbox"/> CLASS I <input type="checkbox"/> CLASS 2		

NOTICE TO INMATE

NOTICE TO INMATE

You are scheduled for a hearing on this allegation on the date and the time indicated or as soon thereafter as possible. You may remain silent, if you wish. Anything you say will be used against you both at the misconduct hearing and in a court of law if this matter is referred for criminal prosecution. If you choose to remain silent, the hearing committee/examiner may use your silence as evidence against you. If you indicate that you wish to remain silent, you will be asked no further questions. If you are found guilty of a Class I misconduct, any pre-release status you have will be revoked.

DC-141 rev. 6-84 DISCIPLINARY HEARING REPORT		PART II B		COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF CORRECTIONS	
DC Number 448692	Name WILLIAMS, JAMES	Institution SCM4	Hearing Date 11-24-98	Hearing Time 423	No. from Part I 869952
NMATE PLEA	<input type="checkbox"/> Guilty <input checked="" type="checkbox"/> Not Guilty	<input type="checkbox"/> No Plea <input type="checkbox"/> Other	Verdict <input checked="" type="checkbox"/> Guilty <input type="checkbox"/> Not Guilty		

HEARING ACTION

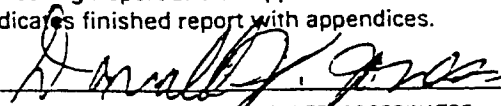
CHARGES B# 7.
D# 2L

FINDINGS OF FACT, VERDICT, AND SANCTIONS IMPOSED

No witness form submitted.
Williams pleads not guilty of both charges, and does not submit a written version.
Williams said, "I would like to plead guilty of both charges." X James Williams

H.E. accepts inmate Williams guilty
Pleas.

Sanction
15 days D.C. Status
effective 11-24-98

<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	The inmate has heard the decision and has been told the reason for it and what will happen. The circumstances of the charge have been read and fully explained to the inmate. The opportunity to have the inmate's version reported as part of the record was given. The inmate has been advised that within 15 days a request for a formal review may be submitted and that this request must contain specific reasons for the review.	SEE APPENDICES <input type="checkbox"/>
NAME(S) OF HEARING EXAMINER/COMMITTEE (TYPED OR PRINTED) D. J. JONES		Hearing Report and all appended information must be signed. Signature indicates finished report with appendices.  SIGNATURE OF HEARING EXAMINER/COORDINATOR

Exhibit

G

Rejected Grievance dated March 5, 99
Appeal of Rejected Grievance and
Central office Response dated April 14, 99

(3)

Commonwealth of Pennsylvania
Department of Corrections
SCI Mahanoy

March 5, 1999

Subject: Returned Grievance

To: James Williams, AY8692
SCI Greene



From: Carol M. Dotter
Corrections Superintendent
Assistant

I am returning this grievance because the grievance system is not used for initiating civil complaints. You may contact your attorney, or obtain further advice from the library. However, the grievance system cannot be used to process such a complaint.

cc: File

To: Defendant
 Defendant
 (J.C. Mahoney)

James J. Williams
 #12427 (F.D.M.)
 J.C. Mahoney

(page 1 of 2)

March 14, 1999

Re: Reported Signature Appeal
 (J.C. Mahoney)

Dear Mr. Mahoney:

I am writing to you about the signature listed March 14, 1999 which I found through mail as a result of my appeal of the signature. I was shocked and surprised to find that the signature was a result of the fact that while the signature is handwritten.

Sincerely,

I, William J. Williams, declare that I am the
author of the signature listed March 14, 1999
and I am not a convicted felon.

On March 14, 1999, while living at 1000 1st Street, I submitted a signature appeal to the court. I was not aware of the fact that I was a convicted felon at the time I submitted the appeal. I was not aware of the fact that I was a convicted felon at the time I submitted the appeal.

I was not aware of the fact that I was a convicted felon at the time I submitted the appeal. I was not aware of the fact that I was a convicted felon at the time I submitted the appeal. I was not aware of the fact that I was a convicted felon at the time I submitted the appeal.

got to workhouse in 1942, arranged to have a copy
 of passport as soon as it was available and to have it
 delivered to the one responsible for processing
 it at the workhouse.

The document was then sent to the State Department
 and the passport was stamped and dated. The
 document from the State Department was then sent
 to the workhouse and the passport was issued.

(See attached document for more details about this)

The purpose of an extraction requirement is to
 ensure that the person is being processed in a
 place of residence provided. It is not to be used
 to provide the opportunity to obtain the necessary information
 to carry out the extraction. The obligation to extract information
 is not to be used to extract information from a person who
 is not a resident of the United States.

Director, Bureau of Investigation, reported on a case
 involving the extraction of information from a person
 who was not a resident of the United States. The person
 was not a resident of the United States and was not
 a resident of the United States. The person was not
 a resident of the United States and was not a resident
 of the United States. The person was not a resident
 of the United States and was not a resident of the
 United States.

At the time of the extraction, the person was not a
 resident of the United States and was not a resident
 of the United States.

As stated, the person was not a resident of the United
 States and was not a resident of the United States.
 The person was not a resident of the United States
 and was not a resident of the United States.

All cases are being
 processed by the

James Williams

James Williams 01/10/2004

James Williams

James Williams

James Williams 01/10/2004



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF CORRECTIONS
P. O. BOX 598
CAMP HILL, PENNSYLVANIA 17001-0598

OFFICE OF THE
SECRETARY OF CORRECTIONS

April 14, 1999

James Williams
AY-8692
SCI Greensburg

Dear Mr. Williams:

Your letter has been reviewed. This situation has been fully explained to you by both your counselor and your Unit Manager. You were brought back inside the institution until they can obtain an official version of your crime to determine what really happened. Once they receive this information, they will make a determination regarding your outside clearance. You will need to be patient until they receive the official version from Philadelphia.

If you have any further questions, please contact your counselor or Unit Manager.

Sincerely,

A handwritten signature in cursive script, appearing to read "K. Zwierzyna".

Kathleen Zwierzyna
Assistant to Deputy Secretary
Western Region

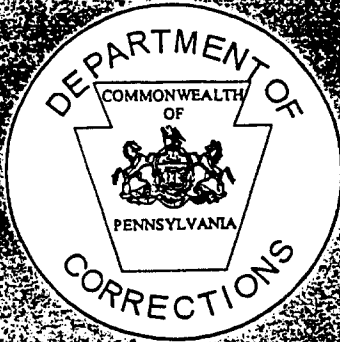
KZ/MAP

C: Superintendent English
Central File
File

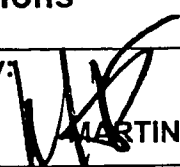
Exhibit

H

Criminal Violations DC-ADM-004



POLICY STATEMENT
Commonwealth of Pennsylvania • Department of Corrections

Policy Subject: Criminal Violations		Policy Number: DC ADM 004
Date of Issue: June 4, 1999	Authority:  MARTIN F. HORN	Effective Date: August 4, 1999

I. AUTHORITY

The Authority of the Secretary of Corrections to direct the operation of the Department of Corrections is established by Sections 201, 206, 506, and 901-B of the Administrative Code of 1929, Act of April 9, 1929, P.L. 177, No. 175, as amended.

II. PURPOSE

It is the purpose of this policy to ensure that all alleged criminal acts committed by or to inmates are processed, investigated, referred to the appropriate law enforcement authority and disposed of, by prosecution and/or administrative action.

III. APPLICABILITY

This policy is applicable to all employees and inmates in all facilities under the jurisdiction of the Department of Corrections.

IV. DEFINITIONS

A. Administrative Custody

A status of confinement for non-disciplinary reasons which provides closer supervision, control, and protection than is provided in general population.

B. Department

Pennsylvania Department of Corrections.

C. Liaison

Communication between different units or groups of an organization.

D. OPR

Office of Professional Responsibility.

DC-ADM 004, Criminal Violations Policy**E. Program Review Committee (P.R.C.)**

A committee consisting of three (3) staff members that conducts Administrative Custody Hearings, periodic reviews, makes decisions regarding continued confinement in the Restricted Housing Unit (RHU) and/or Special Management Unit (SMU), and hears all first level appeals of misconducts. The committee shall consist of one staff member from each of the following classifications: Deputy Superintendent, who shall serve as the chairperson, Inmate Program Manager, Unit Manager, School Principal, Drug and Alcohol Treatment Specialist Supervisor, or Inmate Records Officer Supervisor and a Commissioned Officer. The Superintendent may designate other staff as committee members, however, if such designations are made, they must be in writing and the Superintendent must maintain a list of all designees. Whenever a P.R.C. is convened, at least one (1) member of the committee must be a staff member who is not directly involved in the administration of the RHU/SMU in which the inmate is currently housed.

F. PSP

The Pennsylvania State Police.

V. POLICY

It is the policy of the Department to ensure that all alleged criminal acts by inmates and employees are processed, investigated, and disposed of, by prosecution and/or administrative action.¹

VI. PROCEDURES**A. Criminal Complaints By Inmates**

1. Each inmate shall be informed, upon reception, and otherwise by notice in the Inmate Handbook of his/her right to make a criminal complaint for any criminal act, threatened or committed against him/her by anyone.
2. Any employee receiving an inmate complaint of the type contemplated by this directive shall notify immediately the senior officer then in charge of the facility concerning the nature of the complaint, and confirm the same in writing.
3. No inmate shall be disciplined for making a good faith criminal complaint. The inmate's custody status shall not be affected unless the inmate requests placement in self-confinement for protective custody or a senior officer determines, after preliminary evaluation, that self-confinement is necessary to protect the inmate or maintain the security of the facility pending investigation. When it is determined that protective measures are necessary, the shift commander shall take appropriate action.
4. Any inmate who makes a criminal complaint which, upon investigation, is determined to be false, may be prosecuted and shall be subject to discipline.

¹ 3-4219, 3-ACRS-3C-03, 1-ABC-3C-03

5. Inmate contact with District Attorney

- a. If after investigation of an inmate complaint by the PSP or facility authorities, it is determined that a prosecution will not be instituted by either the PSP or the facility authorities, the inmate-complainant shall be notified in accordance with established facility procedure of (1) the determination not to prosecute; (2) the reasons for the determination; and (3) of his/her right to communicate with the District Attorney to investigate the complaint further.
- b. Whenever an inmate exercises his/her right to communicate with the District Attorney or PSP, the facility shall promptly forward the communication. All information developed by the facility shall be available if requested by the District Attorney. The District Attorney shall be notified of the availability of PSP investigative assistance, but copies of any PSP reports in possession of the facility or the Department shall not be transmitted to the District Attorney. Requests for PSP reports will be referred to the PSP.

B. Criminal Complaints Against Inmates

1. Whenever the Superintendent, Deputy Superintendent for Facilities Management or designee receives sufficient information, regardless of the source, alleging that an inmate has committed a crime, they shall insure that the disciplinary process in accordance with Department **policy DC-ADM 801, "Inmate Disciplinary and Restricted Housing Procedures"** has been initiated.
2. Staff related procedures for investigation and determination that a crime has been committed are contained in the Procedure Manual for this policy. This procedure manual is **not public information** and shall not be released in its entirety or in part, without the prior approval of the Secretary of Corrections or designee.

VII. SUSPENSION DURING EMERGENCY

In an emergency or extended disruption of normal facility operations, the Secretary , or designee, may suspend any provision or section of this policy for a specified period.

VIII. RIGHTS UNDER THE POLICY

This policy does not create rights in any person nor should it be interpreted or applied in such a manner as to abridge the rights of any individual. This policy should be interpreted to have sufficient flexibility so as to be consistent with law and to permit the accomplishment of the purpose of the policies of the Department.

IX. RELEASE OF INFORMATION AND DISSEMINATION OF POLICY

A. Release Of Information

1. Policy

This policy document is public information and may be released to members of the public, staff, legislative, judicial, law enforcement and correctional agencies and/or inmates upon request.

2. Procedure Manual (if applicable)

The procedure manual for this policy is not public information and shall not be released in its entirety or in part, without the prior approval of the Secretary of Corrections or designee. This manual or parts thereof, may be released to any Department employee on an as needed basis.

B. Distribution Of Policy

1. General Distribution

The Department's policy and procedure manuals (when applicable) shall be distributed to the members of the Central Office Executive Staff, all Facility Managers, and Community Corrections Regional Directors on a routine basis. Distribution to other individuals and/or agencies is subject to the approval of the Secretary of Corrections or designee.

2. Distribution to Staff

It is the responsibility of those individuals receiving policies and procedures, as indicated in the "General Distribution" section above, to ensure that each employee expected or required to perform the necessary procedures/duties is issued a copy of the policy and procedures.

X. SUPERSEDED POLICY AND CROSS REFERENCE

A. Superseded Policy

This policy supersedes the previous policy on this subject, by former Secretary Glen R. Jeffes issued May 1, 1984.

B. Cross References

1. Administrative Manuals

- a. DC-ADM 812, Inmate Visiting Privileges
- b. DC-ADM 801, Inmate Disciplinary and Restricted Housing Procedures


Exhibit

I

Inmate Abuse Allegation Monitoring
DC-ADM-001



POLICY STATEMENT
Commonwealth of Pennsylvania • Department of Corrections

Policy Subject: Inmate Abuse Allegation Monitoring		Policy Number: DC-ADM 001
Date of Issue: December 19, 2001	Authority:  Jeffrey A. Beard, Ph.D.	Effective Date: January 14, 2002

I. Authority

The Authority of the Secretary of Corrections to direct the operation of the Department of Corrections is established by Sections 201, 206 and 506 and 901-B of the Administrative Code of 1929, 71 P.S. §§61, 66, 186 and 310-1, Act of April 9, 1929, P.L. 177, No. 175, as amended.

II. Purpose

The purpose of this document is to establish policy and procedures for the reporting and investigation of allegations of inmate abuse.

III. Applicability

This policy is applicable to all persons employed by, incarcerated in, or who have business with the Department of Corrections.

IV. Definitions

A. Abuse

1. Conduct that is prohibited either by law or by Department policy. Such conduct involves:
 - a. the use of excessive force upon an inmate;
 - b. an occurrence of an unwarranted life-threatening act against an inmate; and/or
 - c. an articulated verbal or written threat to inflict physical injury directed toward an inmate.

2. Excluded from this definition are:

- a. conditions of confinement;
- b. claims of inadequate medical or intentionally denied medical care;
- c. harassment or nonperformance of duty by a staff member; and/or
- d. abuse by another inmate.

B. Abuse Allegation Monitoring

The procedures for collecting and reviewing information regarding complaints and grievances of abuse of inmates.

C. Central Office

The Headquarters of the Department of Corrections.

D. Complaint

An allegation of abuse submitted by an inmate or other person or entity to the Department.

E. Complainant

The person or entity submitting a complaint on his or her own behalf or on behalf of an inmate.

F. Department

The Pennsylvania Department of Corrections.

G. Facility

Any State Correctional Institution, State Regional Correctional Facility, Community Corrections Center, Contract Facility or Motivational Boot Camp operated by the Department.

H. Facility Manager

The Superintendent of a State Correctional Institution, State Regional Correctional Facility, Commander of a Motivational Boot Camp, Regional Director of a Community Corrections Center and/or the Director of the Training Academy.

I. Grievance

An allegation of abuse submitted by an inmate through the Inmate Grievance System.

J. Grievant

The inmate submitting a grievance.

K. Inmate

A person committed to the custody of the Department and incarcerated at any state correctional facility.

L. Office of Professional Responsibility (OPR)

The Office responsible for monitoring inmate abuse allegations.

M. Secretary's Office of Inmate Grievances and Appeals

The office responsible for the review and disposition of all appeals of inmate grievances to Central Office.

V. Policy

It is the policy of the Department to ensure that inmates are not subjected to corporal or unusual punishment, humiliation, mental abuse,¹ or punitive interference with the daily functions of institutional living and that any alleged abuse is thoroughly investigated.¹

VI. Procedures

A. The Department of Corrections has the legislatively delegated responsibility to exercise lawful authority in the administration of the state correctional system. The Department of Corrections is committed to ensuring that the correctional system is administered and operated in a safe secure manner.

B. Four classes of persons and entities can make allegations of inmate abuse:

1. all persons who are employed by the Department;
2. all persons committed to the custody of the Department;
3. all persons and entities having business with or using the resources of the Department; and
4. all persons and entities attempting, establishing, or maintaining contact with persons committed to the custody of the Department.

C. Reporting Of Inmate Abuse Allegations All Persons Who Are Employed by the Department

Any employee receiving written or verbal notification from an inmate or a third party alleging an incident of abuse, or who is a witness to an abuse, is required to complete a **DC-121 Part 3, Employee Report of Extraordinary Occurrence** for submittal to his/her supervisor and the facility's Grievance Coordinator. All reports shall be completed prior to completion of the employee's duty shift.

DC-ADM 001, Inmate Abuse Allegation Monitoring Policy

- D. Reporting of Inmate Abuse Allegations by All Persons Committed to the Custody of the Department
1. Any Inmate who is the victim of an abuse may report the abuse in the following manner:
 - a. filing an inmate grievance in accordance with Department policy **DC-ADM 804, "Inmate Grievance System;"**
 - b. reporting it in writing, or verbally, to any staff member; or
 - c. reporting it in writing to the Office of Professional Responsibility of the Department of Corrections.
 2. Abuse allegations received by other Central Office employees shall be referred to the Office of Professional Responsibility.
- E. Reporting of Inmate Abuse Allegations by All Persons and Entities Having Business With or Using the Resources of the Department and All Persons and Entities Attempting, Establishing, or Maintaining Contact With Persons Committed To The Custody Of The Department.

Any person having knowledge concerning an alleged abuse may make reports of allegations of inmate abuse, verbally or in writing, to any staff member of the facility or of the Central Office of the Department.

VII. Suspension During An Emergency

In an emergency or extended disruption of normal facility operation, the Secretary, or designee may suspend any provision or section of this policy, for a specific period.

VIII. Rights Under This Policy

This policy does not create rights in any person nor should it be interpreted or applied in such a manner as to abridge the rights of any individual. This policy should be interpreted to have sufficient flexibility to be consistent with law and to permit the accomplishment of the purpose(s) of the policies of the Department of Corrections.

IX. Release of Information and Dissemination Of Policy

A. Release of Information

1. Policy

This policy document is public information and may be released to members of the general public, staff, legislative, judicial, law enforcement and correctional agencies and/or inmates upon request.

2. Procedure Manual (if applicable)

The procedure manual for this policy is not public information and shall not be released in its entirety or in part, without the prior approval of the Secretary of Corrections or designee. This manual or parts thereof, may be released to any Department of Corrections employee on an as needed basis.

B. Distribution of Policy**1. General Distribution**

The Department of Corrections' policy and procedure manuals (when applicable) shall be distributed to the members of the Central Office Executive Staff, all Facility Managers, and Community Corrections Regional Directors on a routine basis. Distribution to other individuals and/or agencies is subject to the approval of the Secretary of Corrections or designee.

2. Distribution to Staff

It is the responsibility of those individuals receiving policies and procedures, as indicated in the "General Distribution" section above, to ensure that each employee expected or required to perform the necessary procedures/duties is issued a copy of the policy and procedures.

X. Superseded Policy and Cross Reference**A. Superseded Policy And Procedure****1. Department Policy**

- a. 1.2.4, Inmate Abuse Allegation Monitoring Process issued October 2, 1992, by former Secretary Joseph D. Lehman,
- b. 1.2.4-1, Inmate Abuse Allegation Monitoring Process issued May 16, 1995, by former Secretary Martin F. Horn,
- c. 1.2.4-2, Inmate Abuse Allegation Monitoring Process issued December 7, 1995, by former Executive Deputy Secretary Raymond E. Clymer, Jr.

2. Facility Policy and Procedures

This document supersedes all facility policy and procedures on this subject.

B. Cross References:**1. Administrative Manuals**

- a. DC-ADM 804, Inmate Grievance System
- b. 6.3.1, Facility Security

Exhibit

J

Page one(1) thru Eight (8)
(D.A. office, state Police, and OPR Responses)
To Complaint against Defendant.

DISTRICT ATTORNEY'S OFFICE
COUNTY OF SCHUYLKILL



DISTRICT ATTORNEY
CLAUDE A. LORD SHIELDS
ASSISTANT DISTRICT ATTORNEYS
CHARLES A. BRESSI JR.
KAREN BYRNES-NOON
JAMES G. CARAVAN
JAMES F. MENCONI

LEO BREZNIK
EDWARD M. BRENNAN
MICHAEL A. OPAKE

COURT HOUSE
401 N 2ND ST
POTTSVILLE PA 17901-2520

TELEPHONE AREA CODE 717-628-1350

CHIEF CLERK
ROSE M. RHODY
COUNTY DETECTIVES
TERRY L. MOLL, CHIEF
THOMAS R. QUINN
ROBERT L. FREIER
EUGENE R. TAYLOR
FRANCIS V. MCANDREW
DEPUTY ADMINISTRATOR
HAROLD J. ROWAN

3/1/99

Dear Sir:

Your letter of complaint has been rec'd at our office on 3/1/99 .
Your complaint has been forwarded to Clifford O'Hara, Director Special Investigations,
55 Utley Dr., PO Box 598 Camp Hill Pa., 17001.

Criminal complaints are rec'd from the district justice in the area in which the violation occurs. The district justice that covers SCI Mahanoy is William Slezosky, 930 W Center St Mahanoy City Pa 17948.

Respectfully submitted:

Det WJ Allar

Det William J. Allar
District Attorney's Office



PENNSYLVANIA STATE POLICE
BUREAU OF CRIMINAL INVESTIGATION
1800 ELMERTON AVENUE
HARRISBURG, PA 17110-9758

PHONE: 717-783-5524
FAX: 717-705-2306

March 17, 1999

James Williams
AY-8692
1040 E. Roy Furman Highway
Waynesburg, PA 15370-8090

Dear Mr. Williams:

Your letter to the Pennsylvania State Police concerning conditions at the State Correctional Institution - Mahanoy has been referred to this office for response.

The Department of Corrections has established a Bureau of Professional Responsibility who will review your concerns. I am forwarding a copy of your letter to the Director, Bureau of Professional Responsibility, for any action he deems appropriate. In the future, your complaints should be submitted to the Bureau of Professional Responsibility.

I trust the aforementioned information will be of some assistance to you in this matter.

Sincerely,

A handwritten signature in cursive script that reads "Jon D. Kurtz".

Captain Jon D. Kurtz *JKD*
Director, General Investigation Division
Bureau of Criminal Investigation

To: Captain Jon D. Kurtz
Director Investigation Division
1800 Elmerton Ave
Harrisburg, PA. 17110-9758

JAMES WILLIAMS
AY-8692
175 Progress Dr
Waynesburg, PA. 15370

July 13, 2004

Dear Kurtz.

Attached is a copy of your letter "Notice" dated March 17, 1999 relative to my complaint & filed against Mr. Spaide at S.C.E. Mahanoy.

1. Do your office have any copies of my complaint? if so please forward me a copy.

2. According to Clifford O'HARA, Director of Bureau of Professional Responsibility his office never received any copy of complaint from you concerning conditions at S.C.E. Mahanoy against Spaide.

Do you or your office have any documentation of proof that you did mail such documents to his office? My complaint may be dismissed because state claims I ~~have~~ never filed any complaints against Mahanoy because your office or you forgot to forward my complaint as indicated in your letter I'll pay for any such documents

I'll await your reply, James Williams



PENNSYLVANIA STATE POLICE
8000 Bretz Drive
Harrisburg, PA 17112



July 21, 2004

James Williams
AY-8692
175 Progress Drive
Waynesburg, PA 15370

Dear Mr. Williams

Your letter to the Pennsylvania State Police and attachments concerning your conditions at the State Correctional Institution - Mahanoy was referred to the Director, Bureau of Professional Responsibility, Department of Corrections.

General Correspondence we receive is kept on file for only two years and then it's purged. All Correctional Institution complaint correspondence received involving personnel complaints is forwarded directly to the Correctional Institute's Bureau of Professional Responsibility.

I'm sorry that I can't be of further assistance in this matter

Sincerely,

A handwritten signature in black ink, appearing to read "J. D. Kurtz".

Captain Jon D. Kurtz
Commanding Officer
Troop H, Harrisburg

To: Clifford O'HARA.
Director Special Investigation
55 Utley Dr. P.O. Box 598
Camp Hill, PA. 17001.

JAMES WILLIAMS
AY-8692
175 Progress Dr
Waynesburg, Pa. 153

July 13, 2004

DEAR, O'HARA.

Attached is a copy of a letter "Notice" from the District Attorney's office of County of Schuylkill 3-11 and letter "Notice" from PA State Police Headquarter in HARRISBURG, PA. 3-17-99

According to Det William J. Allar D.A. office and Captain Jon D. KURTZ State Police. I filed a criminal and civil complaint against MR Spaide at S.C.F. Mahanoy back in 1999. According to both parties they forward my complaint "concerns" to your office to date I have not receive any response from you or your office as of July 13, 2004. My criminal ASSAULT is still pending and civil suit. According to attached documents are your office telling me that you never recd my complaint filed against MR Spaide at Mahanoy? if so, what was the outcome of this investigation? Mahanoy staff claims your office never made any investigation on the matter or have any knowledge of my complaint. I'll await your reply. James Williams



PENNSYLVANIA DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PENNSYLVANIA 17001-0598
(717) 975-4859
OFFICE OF PROFESSIONAL RESPONSIBILITY
(717) 731-7777
July 20, 2004

James Williams, AY-8692
State Correctional Institution Greene

Dear Mr. Williams:

The Office of Professional Responsibility recently received your correspondence dated July 13, 2004.

Your complaint was previously investigated by SCI-Mahanoy staff. You need to contact SCI-Mahanoy for any further information.

Your correspondence is being referred to Superintendent Folino and Superintendent Klem for any action they deem appropriate.

Sincerely,

A handwritten signature in black ink that reads "Anthony W. Russ".

Anthony W. Russ

Major

Office of Professional Responsibility

AWR/yb

cc: Superintendent Folino, SCI-GRN (w/enclosure)
Superintendent Klem, SCI-MAH (w/enclosure)

To: MAJOR Anthony W. Russ
Office of Professional Responsibility
55 Eitley Dr P.O. Box 598
Camp Hill, PA 17001.

P.S. I'm trying to avoid
Court order for these documents
of your investigation. I never
received any copy }
July 27, 2004

From
JAMES WILLIAMS
AY-8692 (S.C.E. Greene)
175 Progress Dr.
Waynesburg, PA 15370

RE: CRIMINAL and Civil Complaint Filed Against
S.C.E. Mahanow Staff. L.M. Spaide.

DEAR MAJOR RUSS.

I'm in receipt of your letter dated July 20, 2004
relating to my letter dated July 13, 2004.

1. In your letter you stated my complaint was
previously investigated by S.C.E. Mahanow staff that I should
contact them.

Unfortunately S.C.E. Mahanow staff decline to forward
me any copy of requested investigation documents mainly
because I have pending criminal charges filed against me
and I have pending civil law suit filed against S.C.E. Mahanow
staff Mr. Spaide.

2. I only request from your office any copy of
the outcome your office made or the conclusions of
S.C.E. Mahanow staff investigation concerning my complaint
filed against Mr. Spaide and staff concerning 1999 assault
and filing of my civil and criminal complaint against staff.
According to State Police they forwarded my com-
plaint to your office back in 1999. your office never contact
me concerning my complaint!! What was the outcome
of this investigation. I need to know
James Williams
AY-8692



PENNSYLVANIA DEPARTMENT OF CORRECTIONS
P.O. BOX 598
CAMP HILL, PENNSYLVANIA 17001-0598
(717) 975-4859
OFFICE OF PROFESSIONAL RESPONSIBILITY
(717) 731-7777
August 3, 2004

James Williams, AY-8692
State Correctional Institution Greene

Dear Mr. Williams:

The Office of Professional Responsibility recently received your correspondence dated July 27, 2004.

As you have been previously advised, the investigation was conducted by SCI-Mahanoy staff. You will receive no further information from this office regarding this matter.

Your correspondence is being referred to Superintendent Folino and Superintendent Klem for any action they deem appropriate.

Sincerely,

A handwritten signature in black ink that reads "Anthony W. Russ".

Anthony W. Russ
Major
Office of Professional Responsibility

AWR/yb

cc: Superintendent Folino, SCI-GRN (w/enclosure)
Superintendent Klem, SCI-MAH (w/enclosure)

In the United States District Court
For the Middle District of Pennsylvania

James H. Williams
(Plaintiff)

Civil No[#] 1:cv-01-0280

vs

Richard W. Spaide
(Defendant)

Judge Kane

Certificate of Service

I, James H. Williams, pro se, hereby certify that on December 13, 04, I served a true and correct copy of Appendix Exhibits "A thru J" for Plaintiff's statement of Matter facts, Summary Judgment, Multiple documents, by causing it to be deposited in the United States Mail First class postage prepaid to the following: by Certified Mail # 7003-2260-0002-6445-6193.

office of the clerk
U.S. District Court House
228 Walnut St. P.O. Box 983
Harrisburg, Pa. 17108
Certified Mail #
7003-2260-0002-6445-6193

Date: December 13, 2004

✓ Not Served ✓
Linda S. Lloyd
Deputy Attorney General

Respectfully Submitted
James Williams
James Williams AY-8692
175 Progress Dr.
Waynesburg, Pa. 15370